

**General Assembly**

Distr. Limited
28 September 2016

Original: English

Human Rights Council**Thirty-third session**

Agenda item 3

**Promotion and protection of all human rights, civil,
political, economic, social and cultural rights,
including the right to development**

Albania, Andorra,* Austria,* Burkina Faso,* Colombia,* Liechtenstein,* New Zealand,* Romania,* Thailand,* the former Yugoslav Republic of Macedonia, Ukraine:* draft resolution

33/... Preventable maternal mortality and morbidity and human rights

The Human Rights Council,

Recognizing that preventing maternal mortality and morbidity is one of the human rights priorities for all States, and reaffirming that all human rights are universal, indivisible, interrelated, interdependent and mutually reinforcing,

Recalling its previous resolutions on preventable maternal mortality and morbidity and human rights,

Reaffirming the Beijing Declaration and Platform for Action and the Programme of Action of the International Conference on Population and Development, and their review conferences and outcome documents, and reaffirming also the resolutions and agreed conclusions of the Commission on the Status of Women, and noting the adoption by the Committee on Economic, Social and Cultural Rights of its general comment No. 22 (2016) on the right to sexual and reproductive health, and the adoption by the Committee on the Rights of Persons with Disabilities of its general comment No. 3 (2016) on women and girls with disabilities,

Welcoming the efforts of the World Health Organization to prevent maternal mortality and morbidity, taking note of World Health Assembly resolution 69.2 and report A68/16, and recalling the global commitment to the reduction of maternal mortality and to universal access to reproductive health,

Taking into account General Assembly resolution 70/1 of 25 September 2015, entitled "Transforming our world: the 2030 Agenda for Sustainable Development", and its call to take the bold and transformative steps urgently needed to shift the world on to a

* State not a member of the Human Rights Council.



sustainable and resilient path, to ensure that no one will be left behind and to make efforts to reach the furthest behind first.

Taking note of the Secretary-General's renewed Global Strategy on Women's, Children's and Adolescents' Health, and recognizing the important role it may play in the realization of sexual and reproductive health and rights and reducing preventable maternal mortality and morbidity,

Recognizing the importance of strengthening coordination between all relevant United Nations agencies, in accordance with their respective mandates, in reducing preventable maternal mortality and morbidity,

Stressing that reducing maternal mortality and morbidity in accordance with human rights obligations and commitments will require efforts across the 2030 Agenda for Sustainable Development and the Addis Ababa Action Agenda of the Third International Conference on Financing for Development,¹

Recognizing the positive contribution that the work of the Human Rights Council, including its universal periodic review mechanism, may make to national, regional and global efforts in relation to preventable maternal mortality and morbidity,

Reaffirming that States parties to the International Covenant on Economic, Social and Cultural Rights have an obligation to respect, protect and fulfil the right to sexual and reproductive health as an integral part of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health,

Recognizing that sexual and reproductive health and rights are integral to the progressive realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, and that comprehensive sexual and reproductive health care and services contain the interrelated and essential elements of availability, accessibility, affordability, acceptability and quality, on the basis of non-discrimination and formal and substantive equality, while including the need to address intersectional and multiple forms of discrimination,

Emphasizing that realizing the rights of women and girls, which are equal to those of men and boys, in the context of health and safety requires the provision of differential services, treatment and medicines in accordance with their specific needs throughout their life cycle, which are distinctively different to those of men, and the elimination of the social and economic barriers that may make them more vulnerable,

Reaffirming that the human rights of women include a woman's right to have control over, and to decide freely and responsibly on, matters related to her sexuality, including sexual and reproductive health, free of coercion, discrimination and violence, and that equal relationships between women and men in matters of sexual relations and reproduction, including full respect for the integrity of the person, require mutual respect, consent and shared responsibility for sexual behaviour and its consequences,

Recognizing the importance of identifying, within the framework of the Sustainable Development Goals, appropriate national indicators in reducing maternal mortality and morbidity in accordance with relevant human rights obligations and commitments,

Bearing in mind the need to take measures, such as collecting disaggregated data and conducting surveys, to ensure that no one is left behind, especially women experiencing multiple and intersecting forms of discrimination, and are accounted for in official statistics,

¹ General Assembly resolution 69/313.

Deeply concerned that, despite the impressive reductions in maternal mortality rates achieved since 1990, according to the World Health Organization, in 2015, there were an estimated 303,000 maternal deaths of women and girls, which were largely preventable, and that many more women and girls suffer serious and sometimes lifelong injuries, which have severe consequences for their enjoyment of their human rights and their overall well-being,

Affirming that a significant reason for the high rates of maternal mortality and morbidity in developing countries is the lack of adequate development and infrastructure in certain areas,

Recognizing that there are large disparities in maternal mortality and morbidity rates between countries, but also within countries, and between women with a high and a low income, and between those living in rural as against urban areas, and noting with concern that the risk of maternal mortality is highest for adolescent girls under 15 years of age, and that complications in pregnancy and childbirth is a leading cause of death among adolescent girls in developing countries, recognizing also that the risk of maternal mortality and morbidity is exacerbated in armed conflict and humanitarian crisis situations,

Deeply concerned that there are continuing violations of the right to sexual and reproductive health, which have a negative impact on rates of maternal mortality and morbidity, and that the full enjoyment of this right remains a distant goal for many women and girls throughout the world,

Regretting the multitude of factors that can lead to maternal mortality and morbidity, including lack of accessible and appropriate health-care services, information and education, lack of access to emergency obstetric care, poverty, all types of malnutrition, harmful practices, including child, early and forced marriage and female genital mutilation, denial of contraception, unsafe abortion, discrimination against women, gender inequality and gender-based stereotypes,

Convinced that greater political will and commitment, international cooperation and technical assistance at all levels are urgently required to reduce the unacceptably high global rate of preventable maternal mortality and morbidity, and that the integration of a human rights-based approach can contribute positively to the common goal of reducing that rate,

Recognizing the need for enhanced cooperation aimed at strengthening capacities and promoting adequate transfer of technology on mutually agreed terms to developing countries in order to prevent maternal mortality and morbidity in those countries,

Acknowledging that the failure to prevent maternal mortality and morbidity is one of the most significant barriers to the empowerment of women and girls in all aspects of life, the full enjoyment of their human rights, their ability to reach their full potential and to sustainable development in general,

1. *Urges* all States to renew their political commitment to eliminate preventable maternal mortality and morbidity at the local, national, regional and international levels, and to strengthen their efforts to address multiple and intersecting inequalities and to remove all barriers to access to sexual and reproductive health facilities, services, goods and information, and education, ensure the full and effective implementation of their human rights obligations, and their commitments as addressed in the Beijing Declaration and Platform for Action, the Programme of Action of the International Conference on Population and Development and the outcome documents of the review processes, including the commitments relating to sexual and reproductive health and reproductive rights, and the 2030 Agenda for Sustainable Development and the Sustainable Development Goals, considering the Goals on improving maternal health and promoting

gender equality and empowering women, and other interlinked Goals, by ensuring universal access to quality maternity, sexual and reproductive health-care services, including through international assistance and cooperation, the allocation of domestic resources to health systems and the provision of the necessary information and services in relation to the right to the highest attainable standard of physical and mental health, including the sexual and reproductive health of women and girls.

2. *Requests* States and other relevant actors to give renewed emphasis to maternal mortality and morbidity initiatives in their development partnerships and international assistance and cooperation arrangements, including by strengthening technical cooperation to address maternal mortality and morbidity, including through the transfer of expertise, technology and scientific data, and exchanging good practices with developing countries, while honouring existing commitments, and to integrate a human rights-based perspective into such initiatives, addressing the impact that discrimination against women has on maternal mortality and morbidity;

3. *Urges* States and encourages other relevant stakeholders, including national human rights institutions and non-governmental organizations, to take action at all levels, utilizing a comprehensive human rights-based approach to address the interlinked causes of maternal mortality and morbidity, such as lack of accessible, affordable and appropriate health-care services for all, and of information and education, poverty, all types of malnutrition, harmful practices, including child, early and forced marriage and female genital mutilation, early childbearing, gender inequalities and all forms of discrimination and violence against women, and to pay particular attention to eliminating all forms of violence against women and girls, especially adolescent girls, while ensuring the meaningful and effective participation of women and girls in the relevant processes;

4. *Urges* States to take steps to ensure that laws, policies and practices respect women's equal right to decide autonomously in matters regarding their own lives and health, including their bodies, by repealing discriminatory laws relating to third-party authorization for health information and services, and combating gender stereotypes and behaviours that discriminate against them;

5. *Welcomes* the report of the Office of the United Nations High Commissioner for Human Rights on the follow-up on the application of the technical guidance on the application of a human rights-based approach to the implementation of policies and programmes to reduce preventable maternal mortality and morbidity,² and encourages States and stakeholders to consider the adoption of the recommendations contained therein;

6. *Calls upon* all relevant actors, including Governments, regional organizations, relevant United Nations agencies, national human rights institutions and civil society organizations to, within their respective mandates, strengthen their efforts to reduce preventable maternal mortality and morbidity, including through the application of the technical guidance, as appropriate, when designing, implementing and reviewing policies and evaluating programmes to reduce preventable maternal mortality and morbidity, while ensuring the meaningful participation of women and girls in all decisions that affect them;

7. *Calls upon* all relevant United Nations agencies, funds and programmes, within their respective mandates, to provide technical cooperation and assistance to States, upon their request, to support the application of the technical guidance and other related commitments regarding maternal mortality and morbidity;

² A/HRC/33/24.

8. *Encourages* States to consider using general comment No. 22 (2016) of the Committee on Economic, Social and Cultural Rights as a point of reference in their efforts towards the implementation of the Sustainable Development Goals relevant to preventable maternal mortality and morbidity;

9. *Also calls upon* States to ensure that indicators adopted at the national level to monitor progress and impact are aligned with human rights obligations and commitments, including in the context of the implementation of the 2030 Agenda, to complement indicator analysis with human rights reporting.

10. *Further calls upon* States to assess accountability mechanisms, where they exist, in relation to maternal mortality and morbidity, including the monitoring of inequities, while ensuring access to justice for women and girls, and to build accountability into interventions and strategies, to monitor the functioning and effectiveness of those mechanisms and processes and to take remedial action to ensure they are responsive to human rights;

11. *Encourages* the High Commissioner to promote awareness and utilization of the technical guidance, as appropriate, by all relevant actors in order to accelerate the realization of the rights of women and girls and the achievement of Sustainable Development Goal target 3.1, considering its possible interlinkages with other Sustainable Development Goals.

12. *Decides* to convene, at its thirty-fourth session, a panel discussion on the linkages between the Sustainable Development Goals relating to preventable maternal mortality and morbidity and sexual and reproductive health and rights, and that the discussion shall be fully accessible to persons with disabilities, and requests the Office of the High Commissioner to prepare a report on the panel discussion in the form of a summary.

13. *Requests* the High Commissioner to prepare, from within existing resources, in consultation with States, United Nations agencies and all other relevant stakeholders, a follow-up report on good practices and challenges in the application of a human rights-based approach to the elimination of preventable maternal mortality and morbidity, including through the utilization of the technical guidance by States and other relevant actors, including the United Nations Population Fund, the United Nations Development Programme, UN-Women and the World Health Organization, and to present it to the Human Rights Council at its thirty-ninth session.

14. *Decides* to remain seized of the matter.